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Effective 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R.

# FEETRANSMITTAL

## for FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

\$2,100.00

## Complete if Known

Application Number	10/724,595
Filing Date	11/28/2003
First Named Inventor	Kurt B. Holmgren
Examiner Name	Bidwell, James R.
Art Unit	3651
Attorney Docket No.	

## METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

 Deposit Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

## Small Entity

Fee (\$)

Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

## Multiple Dependent Claims

Total Claims	Extra	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
	- 20 or HP =	x \$50.00	= \$0.00		

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra	Fee (\$)	Fee Paid (\$)
	- 3 or HP =	x \$200.00	= \$0.00

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 = 0 / 50 0	(round up to a whole)	x \$250.00	= \$0.00

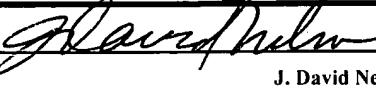
## 4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Fee for additional independent claims

\$2,100.00

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	31,046	Telephone	(801) 576-1400
Name (Print/Type)	J. David Nelson		Date	28 July 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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7-29-05

IFW\$



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

KURT B HOLMGREN

Serial No.: 10/724,595

Filing Date: 11/28/2003

**RESPONSE TO OFFICE ACTION  
AND AMENDMENT**

Group Art Unit: 3651

For: BAGGAGE POSITIONER FOR  
BAGGAGE CONVEYOR

Examiner: BIDWELL, JAMES R.

**RESPONSE TO OFFICE ACTION AND AMENDMENTS**

Applicant submits this response to the office action mailed on January 28, 2005, the three month shortened statutory period for reply expiring on April 28, 2005. This response is accompanied by a petition for three(3) month extension of time to respond and the required fee. Applicant responds to the above-identified office action by making the following amendments and offering the following remarks. This response is also accompanied by the required fee for the additional independent claims resulting from the following claim amendments.

**CERTIFICATE OF MAILING BY EXPRESS MAIL**

I hereby certify that this RESPONSE TO OFFICE ACTION AND AMENDMENT is being deposited as Express Mail with the United States Postal Service, Express Mail mailing label no. ER 442291852 US, with sufficient postage, in an envelope addressed to:

2100.00 OP

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on July 28, 2005.



J. David Nelson

08/01/2005-SSITHIB1.00000039.10724595  
01 FC:2253

510.00 OP

08/01/2005 SSITHIB1.00000039.10724595  
02 FC:2251